## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.	M M / D D / Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.	07 29 2020 Amount
City State Zip Code  Ashburn VA 20148	3162.50 Transaction ID : SE.18055
	Date of Disbursement or Obligation
Purpose of Expenditure Printing / Production / Postage (estimate)  Category/ Type	07 29 / Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
JAMES, JOHN, , ,	President X Senate State: MI
Calendar Year-To-Date Per Election for Office Sought  Disbrace  5425.60  Disbrace 2020	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.	M M / D D / Y Y Y Y
Mailing Address 21850 Inglewood Ct.	07 29 2020
2 1030 inglewood ot.	Amount
City State Zip Code	3162.50
Ashburn VA 20148	Transaction ID : SE.18056
Purpose of Expenditure	Date of Disbursement or Obligation
Printing / Production / Postage (estimate)  Category/ Type	07 29 2020
	ee Sought: House District:
PETERS, GARY, , ,	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought  Disb 2020	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	6325.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	6325.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
24.0	07 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	